EMERGENCY SERVICES DIVISION

BROOKHAVEN NATIONAL LABORATORY

Procedure No: FR-EMS-3.0.5

Revision No: 3

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Title: MEDEVAC Protocols For The Use Of SCPD Helicopters

1.0 **PURPOSE:**

- The use of a helicopter for the transportation of seriously injured victims requires that all emergency personnel be familiar with the procedure and the safe operation in order to provide quality care to the patient.
- 1.2 This procedure covers the MEDVEVAC Protocol for the use of Suffolk County Police Department Helicopter.

2.0 RESPONSIBILITIES:

2.1 It is the responsibility of the Incident Commander or designee to make requests for air transportation for critical patients upon the advisement of the designated EMT. Proper notification to BNL LES and Police shall also be made.

3.0 **DEFINITIONS:**

None

4.0 PREREQUISITES:

None

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5.0 **PRECAUTIONS:**

- 5.1 All ground parties at the scene must obey the direction of the IC and the BNL Police Officer who manages the ground landing site. It is the responsibility of all participants at the scene to maintain strict safety procedures.
- 5.2 To make the helicopter safe for all concerned, and to minimize potential hazards, observe the following practices:
 - 5.2.1 Identify a landing area with a minimum of 100 X 100 feet free of any obstacles such as trees, power lines, antennas, etc.
 - 5.2.2 Secure the landing area to prevent unauthorized persons from approaching.
 - 5.2.3 Keep the landing zone clear of loose articles and hazardous debris, and protect the patient from rotor wash. (**Do Not Use Flares or barrier tape at Landing Zone**).
 - 5.2.4 Keep well clear of the landing area when the helicopter is approaching or taking off.
 - 5.2.5 Turn off all strobe lights, overhead beacons, flashers and headlights.
 - 5.2.6 Park ambulances or any other vehicle outside tip path plane of the main rotor, and parallel to helicopter.
 - 5.2.7 Only essential vehicles are allowed anywhere near the helicopter.

Approaching The Helicopter:

- 5.2.8 Do not approach the helicopter until directed to do so by the pilot.
- 5.2.9 Approach within the pilot's field of vision, preferably within the "safe" zone shown.
- 5.2.10 Carry equipment horizontally, below waist level never upright or above your shoulder.
- 5.2.11 Exercise extreme caution when loading or unloading through the rear doors due to the proximity of the tail rotor. (A safety person will normally be assigned to guard this area.)

6.0 **PROCEDURE:**

- 6.1 Services Provided:
 - Suffolk County Police Department will provide helicopter transportation from the scene of an injury to a hospital.
- 6.2 Flight crews are on duty 24 hours a day.

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6.3 Request Procedure:

On Scene: The decision to request helicopter transportation shall be made to Suffolk County Fire Rescue and Emergency Services either on county fire radio to Fire Com (KEG 977) on F2-46.46MHZ or County Medical Radio to MedCom (KXZ-882) F-1, 155.280MHZ or by telephone to 924-5252 (main) or 924-4815 (supervisor).

6.4 If there is a Suffolk PD sector car on scene, the request should be made through the sector car.

6.5 Patient Selection:

It is recognized that the decision to request air transport is one which is based on the patient's clinical condition and consequent "risk vs. benefit" analysis.

- 6.6 The following clinical situations serve as guidelines in determining when to request helicopter transport:
 - 6.6.1 Patients Appropriate for Helicopter Transport:
 - Patients with life or limb threatening conditions when transportation time can be decreased by more than 10 minutes.
 - 6.6.1.2 Patients with Second or Third Degree Burns covering greater than 20% of the body when ground transportation time to the referral site can be decreased by 10 minutes or more.
 - 6.6.1.3 Patients with a major amputation which could require specialized care at a Reimplantation Center and ground transportation time to the referral site can be decreased by 10 minutes or more.
 - 6.6.1.4 When patient extrication and ground transportation begins to infringe on the "Golden Hour" of trauma care, the helicopter should be considered if transport time can be decreased by 10 minutes or more.
 - 6.6.1.5 Patients with suspected spinal injury when ground transport on unpaved roads interferes with spinal stabilization or may further compromise the patient's condition.
 - 6.6.1.6 Any other stipulation where air transport would provide a significant benefit to the patient.
 - 6.6.2 Patients Inappropriate for Helicopter Transport
 - 6.6.2.1 Patients with a potential altered mental status (emotional disorders, drug/alcohol abuse, or general agitation).
 - 6.6.2.2 Patients who express fear of or specific aversion to air transport.

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- 6.6.2.3 Any patient who, in the judgement of the controlling agency at the scene is potentially inappropriate.
- 6.6.2.4 The Suffolk County Police Department has the authority, and reserves the right, to refuse air transport.
- 6.6.3 Transfer of Medical Responsibility
 - 6.6.3.1 In the event that the helicopter responds without appropriate medical personnel on board, the ground EMT/AEMT will continue medical responsibility for the patient by accompanying the patient in the helicopter.
 - 6.6.3.2 If the helicopter arrives with a medic, treatment may be turned over to the medic.
- 6.6.4 Practical Considerations
 - 6.6.4.1 If possible, ground crew should place patient on narrow backboard (16" maximum) or scoop stretcher in preparation for helicopter transport.

7.0 IMPLEMENTATION AND TRAINING

None

8.0 **REFERENCES**:

None

9.0 **ATTACHMENTS**

None

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